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4 TRACE	1	Application Number	10/816,203-Conf. #7503

## **TRANSMITTAL FORM**

Filing Date April 1, 2004 First Named Inventor David Bolen Art Unit 2176 **Examiner Name** J. H. Blackwell

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

7

Attorney Docket Number T0450.70038US00

ENCLOSURES (Check all that apply)						
X Fee Transi	mittal Form	Drawing(s)		After Allowance Communication to TC		
Fee	Attached	Licensing-related Papers		Appeal Communication to Board of Appeals and Interferences		
X Amendme	nt/Reply	Petition .		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)		
After	Final	Petition to Convert to a Provisional Application		Proprietary Information		
Affidavits/declaration(s)		Power of Attorney, Revocati Change of Correspondence		Status Letter		
x Extension	of Time Request	Terminal Disclaimer		X Other Enclosure(s) (please Identify below):		
Express Al	bandonment Request	Request for Refund		Return Receipt Postcard		
Information	n Disclosure Statement	CD, Number of CD(s)				
Certified C	opy of Priority (s)	Landscape Table on	CD			
	issing Parts/ Application	Remarks				
	y to Missing Parts under FR 1.52 or 1.53					
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT						
Firm Name WOLF, GREENFIELD & SACKS, P.C.						
Signature	Soft J.	Louis				
Printed name	Scott J. Gerwin					
Date	January 2, 2008		Reg. No.	57,866		
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	along with any paper referred to as being attached or enclosed) is being deposited with the U.S. Postal Service on cient postage as First Class Mail in an envelope addressed to: Mail Stop Amendment, Commissioner for dria, VA 22313-1450.
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PTO/SB/17 (10-07) Approved for use through 06/30/2010. OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE vork Reduction Act of 1995, no person are required to respond to a collection of information unless it displays a valid OMB control number. Complete if Known Effective on 12/08/2004. uant to the Consolidated Appropriations Act, 2005 (H.R. 4818). 10/816,203-Conf. #7503 **Application Number** FEE TRANSMITTAL April 1, 2004 Filing Date First Named Inventor David Bolen For FY 2008 **Examiner Name** J. H. Blackwell Applicant claims small entity status. See 37 CFR 1.27 2176 Art Unit T0450.70038US00 TOTAL AMOUNT OF PAYMENT 525.00 (\$) Attorney Docket No. METHOD OF PAYMENT (check all that apply) None Check Credit Card Money Order Other (please identify): <u>23/2</u>825 Deposit Account Name: Wolf, Greenfield & Sacks, P.C. X Deposit Account Deposit Account Number: For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of x | Credit any overpayments fee(s) under 37 CFR 1.16 and 1.17 **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES SEARCH FEES EXAMINATION FEES Small Entity** Small Entity Small Entity Fee (\$) Fee (\$) Fees Paid (\$) **Application Type** Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 310 155 510 255 210 105 Design 210 105 100 50 130 65 310 155 160 80 Plant 210 105 310 155 510 255 620 310 Reissue Provisional 210 105 0 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee (\$) Fee Description Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 210 105 Multiple dependent claims 370 125

Total Claims  Extra Claims  Fee (\$)  Fee Paid (\$)  Multiple Dependent Claims  Fee (\$)  Fee Paid (\$)	
HP = highest number of total claims paid for, if greater than 20.  Indep. Claims	
Indep. Claims Extra Claims Fee (\$) Fee Paid (\$)	
-3= X =	
-3=	
HP = highest number of independent claims paid for, if greater than 3.	
3. APPLICATION SIZE FEE	
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$260 (\$130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).	

Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) **Total Sheets** Extra Sheets - 100 = /50 = (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount)

SUBMITTED BY

Signature	Scott I began	Registration No. (Attorney/Agent)	57,866	Telephone	(617) 646-8000	
Name (Print/Type)	Scott J. Gerwin	<u> </u>		Date	January 2, 2008	
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Dated: January 2, 2008

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Other (e.g., late filing surcharge): 2253 Extension for response within third month

(Rita A. LeBlanc)

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